



RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

APR 13 12:05

CONGRESSMAN PATRICK J. TOOMEY  
15TH DISTRICT, PENNSYLVANIA

April 13, 2000

Federal Election Commission  
999 E Street NW  
Washington, DC 20463

By Certified Mail  
Return Receipt Requested

Re: April 15 Quarterly Report of Pat Toomey for Congress Committee  
FEC ID No. C00326991

Dear Sir or Madam:

Enclosed please find a completed FEC Form 3 and attached schedules (April 15 Quarterly Report) submitted on behalf of the Pat Toomey for Congress Committee.

If you have any further questions or require further information in connection with this report, please do not hesitate to contact the undersigned.

Very truly yours,

Jeffrey Zimskind  
Treasurer

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

1. NAME OF COMMITTEE (In full)  
**Pat Toomey for Congress Committee**

ADDRESS (number and street)  Check if different than previously reported.  
**3615 Congress Street**

CITY, STATE and ZIP CODE STATE/DISTRICT  
**Allentown, PA 18104 PA 15**

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

APR 13 2000

2. FED IDENTIFICATION NUMBER  
**C00326991**

3. IS THIS REPORT AN AMENDMENT?  
 YES  NO

## 4. TYPE OF REPORT

April 15 Quarterly Report  Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_

July 15 Quarterly Report  Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_

October 15 Quarterly Report  Termination Report

January 31 Year End Report

July 31 Mid-Year Report (Non-election Year Only)

This Report Contains Activity For  Primary Election  General Election  Special Election  Runoff Election

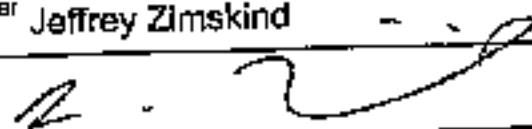
## SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>3/16/2000</u> through <u>3/31/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$52,385.00	\$103,866.62
(b) Total Contribution Refunds (from Line 20(d))	\$0.00	\$2,000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	\$52,385.00	\$101,866.62
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$14,562.41	\$25,620.61
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$14,562.41	\$25,620.61
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$426,628.31	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$101,002.41	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer **Jeffrey Zimskind**

Signature of Treasurer 

Date **4/13/2000**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. Section 437g.

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# DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) <b>Pat Toomey for Congress Committee</b>	C00326991	Report Covering the Period: From: <b>3/16/2000</b>	To: <b>3/31/2000</b>
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I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A) .....	\$18,450.00		11(a)(i)
(ii) Unitemized .....	\$3,265.00		11(a)(ii)
(iii) Total of Contributions from Individuals .....	\$21,715.00	\$55,666.62	11(a)(iii)
(b) Political Party Committees .....	\$0.00	\$200.00	11(b)
(c) Other Political Committees (such as PACs) .....	\$30,650.00	\$48,000.00	11(c)
(d) The Candidate .....	\$0.00	\$0.00	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans; add 11(a)(i), (b), (c), and (d)) .....	\$52,365.00	\$103,866.62	11(e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEE .....</b>	<b>\$0.00</b>	<b>\$0.00</b>	12
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate .....	\$0.00	\$0.00	13(a)
(b) All Other Loans .....	\$0.00	\$0.00	13(b)
(c) TOTAL LOANS (add 13(a) and (b)) .....	\$0.00	\$0.00	13(c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Rebates, Rebates, etc.) .....</b>	<b>\$0.00</b>	<b>\$0.00</b>	14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	<b>\$1,493.29</b>	<b>\$4,163.74</b>	15
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14, and 15) .....</b>	<b>\$53,858.29</b>	<b>\$108,030.36</b>	16
II. DISBURSEMENTS			
<b>17. OPERATING EXPENDITURES .....</b>	<b>\$14,562.41</b>	<b>\$25,620.61</b>	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....</b>	<b>\$0.00</b>	<b>\$0.00</b>	18
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate .....	\$0.00	\$0.00	19(a)
(b) Of All Other Loans .....	\$0.00	\$0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) .....	\$0.00	\$0.00	19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees .....	\$0.00	\$0.00	20(a)
(b) Political Party Committees .....	\$0.00	\$0.00	20(b)
(c) Other Political Committees (such as PACs) .....	\$0.00	\$2,000.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b), and (c)) .....	\$0.00	\$2,000.00	20(d)
<b>21. OTHER DISBURSEMENTS .....</b>	<b>\$0.00</b>	<b>\$350.00</b>	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) .....</b>	<b>\$14,562.41</b>	<b>\$27,970.61</b>	22
III. CASH SUMMARY			
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....</b>		<b>\$387,332.43</b>	23
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16) .....</b>		<b>\$53,858.29</b>	24
<b>25. SUBTOTAL (add Line 23 and Line 24) .....</b>		<b>\$441,190.72</b>	25
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....</b>		<b>\$14,562.41</b>	26
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) .....</b>		<b>\$426,628.31</b>	27

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detail of Summary Page

PAGE 1 OF 6

FOR LINE NUMBER

11(a)(i)

**Contributions from Individuals**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Pat Toomey for Congress Committee**

**C00326991**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Anderson, Richard, Mr.</b> 3350 Bingen Road Bethlehem PA 18015	St Luke's Hospital Network Occupation: President and CEO	3/24/2000	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$300.00		
<b>Avery, Sandra, Mrs.</b> 1626 Bald Eagle Road Arnold MD 21012	Self Occupation: Homemaker	3/22/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$250.00		
<b>Bigelow, Barbara, Ms.</b> 229 N. 27th Street Allentown PA 18104	Easton Hospital Occupation: Vice President	3/23/2000	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$300.00		
<b>Buckley, Walter W, Mr.</b> 1635 Country Road Bethlehem PA 18015	Buckley Mgmt Capital Occupation: Investment Management	3/22/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$500.00		
<b>Burt, Robert, Mr.</b> 5 Kent Road Winnetka IL 60093	FMC Corporation Occupation: Chairman and CEO	3/30/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$250.00		
<b>Butz, Greg L, Mr.</b> 1636 Barkwood Dr Orefield PA 18088	Butz Co Occupation: Developer/Builder	3/31/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		
<b>Cimerole, Joseph M., Mr.</b> 1651 Brookhaven Dr East Allentown PA 18103	Sacred Heart Hospital Occupation: President/CEO	3/23/2000	\$700.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$700.00		

**\$3,300.00**

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 2 OF 6  
FOR LINE NUMBER 11(a)(1)

**Contributions from Individuals**

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NAME OF COMMITTEE (In Full)

**Pat Toomey for Congress Committee**

**C00326991**

A. Full Name, Mailing Address and ZIP Code Clark, Robert, Mr. 49 Sunrise Drive Leighton PA 18235 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Palmerton Hospital Occupation Hospital Administrator Aggregate Year-to-Date > \$300.00	Date (month, day, year) 3/30/2000	Amount of Each Receipt this Period \$300.00
B. Full Name, Mailing Address and ZIP Code Ellis, Heather L, Mrs. 4383 Loralne Lane Bethlehem PA 18017 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Ellis Management Corp Occupation Hotel Management Aggregate Year-to-Date > \$250.00	Date (month, day, year) 3/28/2000	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code Fabiani, James, Mr. 1019 Basil Road Mc Lean VA 22101 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/27/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code French, William, Mr. American Tube Route 946 Nazareth PA 18064 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer American Tube Occupation President and CEO Aggregate Year-to-Date > \$250.00	Date (month, day, year) 3/27/2000	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Frey, Henriette, Mrs. 102 Nightingale Circle Chalfont PA 18914 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Easton Hospital Occupation Vice Pres Finance Aggregate Year-to-Date > \$300.00	Date (month, day, year) 3/22/2000	Amount of Each Receipt this Period \$300.00
F. Full Name, Mailing Address and ZIP Code Fuller, C.T., Mr. Box 32 Willow Brook Farms Calasauqua PA 18032 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Self Occupation Horse Breeder Aggregate Year-to-Date > \$250.00	Date (month, day, year) 3/18/2000	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Gammon, Sara, Ms. 1807 Meadow Ridge Ct Bethlehem PA 18015 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Good Shepherd Occupation President and CEO Aggregate Year-to-Date > \$300.00	Date (month, day, year) 3/24/2000	Amount of Each Receipt this Period \$300.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$2,150.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 6

FOR LINE NUMBER 11(a)(i)

**Contributions from Individuals**

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NAME OF COMMITTEE (in Full)		C00326991	
<b>Pat Toomey for Congress Committee</b>			
<b>A. Full Name, Mailing Address and ZIP Code</b> Gencarelli, David, Mr., Esq. 11 Dupont Circle NW Suite 325 Washington DC 20036	Name of Employer Self  Occupation Attorney  Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):			
<b>B. Full Name, Mailing Address and ZIP Code</b> Iacocca, Dorothy J, Mrs. 2904 Edgemont Dr Allentown PA 18103	Name of Employer Yocco's Inc  Occupation Business Owner  Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/23/2000	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):			
<b>C. Full Name, Mailing Address and ZIP Code</b> Jones, Evan C. 2755 Carole Lane Allentown PA 18104	Name of Employer St. Luke's Hospital  Occupation Senior V.P. Finance  Aggregate Year-to-Date > \$300.00	Date (month, day, year) 3/23/2000	Amount of Each Receipt this Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):			
<b>D. Full Name, Mailing Address and ZIP Code</b> Kern, Peter, Mr. P.O. Box B Brodheadsville PA 18322	Name of Employer Palmerton Hospital  Occupation Administrator  Aggregate Year-to-Date > \$300.00	Date (month, day, year) 3/23/2000	Amount of Each Receipt this Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):			
<b>E. Full Name, Mailing Address and ZIP Code</b> Kincel, Mr. Karl P.O. Box 2058, R.R. 2 Moscow PA 18444	Name of Employer Self Employed  Occupation Insurance Agent  Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/23/2000	Amount of Each Receipt this Period \$1,000.00 Memo Reattributio n
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):			
<b>F. Full Name, Mailing Address and ZIP Code</b> Lieberman, Mark T, Mr. 1480 Keystone Road Allentown PA 18103	Name of Employer Interspace Airport Advertising  Occupation V.P.  Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/28/2000	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):			
<b>G. Full Name, Mailing Address and ZIP Code</b> Liebig, John, Mr. 2517 Union Street Allentown PA 18104	Name of Employer Information Requested  Occupation Information Requested  Aggregate Year-to-Date > \$300.00	Date (month, day, year) 3/20/2000	Amount of Each Receipt this Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):			

\$4,400.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 4 OF 6  
FOR LINE NUMBER 11(a)(i)

**Contributions from individuals**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full) **Pat Toomey for Congress Committee** C00326991

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Miers, W. D., Mr.</b> 883 N. 27th St Allentown PA 18104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Self Occupation: Risk Management Aggregate Year-to-Date > \$500.00	3/28/2000	\$500.00
<b>Mitchell, George Keith, Mr., Jr.</b> 700 S. Smith Drive Quarryville PA 17566 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	N/A Occupation: Private Investor Aggregate Year-to-Date > \$250.00	3/22/2000	\$250.00
<b>Mulholland, Donna, Ms.</b> 3773 Tiffany Drive Easton PA 18045 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Easton Hospital Occupation: President and CEO Aggregate Year-to-Date > \$300.00	3/30/2000	\$300.00
<b>Newhart, Elvin J., Mr.</b> 4543 Laurel Drive Walnutport PA 18088 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Nivle Inc. Occupation: Caterer Aggregate Year-to-Date > \$1,000.00	3/28/2000	\$1,000.00
<b>Palumbo, Ken, Mr.</b> 1705 Saquola Court Allentown PA 18104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Rodale Press Occupation: Art Director Aggregate Year-to-Date > \$300.00	3/20/2000	\$300.00
<b>Ritter, Donald, Hon.</b> 212 B 3rd St NE Washington DC 20002 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	National Environmental Policy Occupation: Chairman Aggregate Year-to-Date > \$1,000.00	3/28/2000	\$1,000.00
<b>Rothkopf, Arthur J, Dr.</b> 515 Collage Ave Easton PA 18042 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Lafayette College Occupation: President Aggregate Year-to-Date > \$250.00	3/28/2000	\$250.00

\$3,600.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Qualified Summary Page

PAGE 5 OF 8

FOR LINE NUMBER

11(a)(i)

**Contributions from Individuals**

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NAME OF COMMITTEE (in Full)

**Pat Toomey for Congress Committee**

**C00326891**

A. Full Name, Mailing Address and ZIP Code Rothrock, Bruce, Mr. 356 Levans Road Schnocksville PA 18078 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Rothrock Car Dealerships Occupation Business Owner Aggregate Year-to-Date > \$250.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and ZIP Code Scharfo, William, Mr. 2910 Gordon Street Allentown PA 18104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$300.00	Date (month, day, year) 3/18/2000	Amount of Each Receipt this Period \$300.00
C. Full Name, Mailing Address and ZIP Code Shuman, Mary Ellen, Mrs. 750 Bushkill Center Road Nazareth PA 18064 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Amazing Events Occupation Business Owner Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/30/2000	Amount of Each Receipt this Period \$600.00
D. Full Name, Mailing Address and ZIP Code Smith, James E, Mr. 5214 Farrington Road Bathesda MD 20816 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer The Smith-Free Group Occupation Chairman Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code Sussman, Elliot J., Dr. 2210 Lehigh Parkway N Allentown PA 18103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Lehigh Valley Hospital Occupation President & Chief Execu Aggregate Year-to-Date > \$300.00	Date (month, day, year) 3/27/2000	Amount of Each Receipt this Period \$300.00
F. Full Name, Mailing Address and ZIP Code Walsh, Robert, Mr. 2717 Fairview Street Allentown PA 18104 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer WAEB Occupation Radio Announcer Aggregate Year-to-Date > \$250.00	Date (month, day, year) 3/18/2000	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Wildrick, Kenneth, Dr. 79 Central Avenue Easton PA 18045 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Easton Hospital Occupation Physician Aggregate Year-to-Date > \$300.00	Date (month, day, year) 3/17/2000	Amount of Each Receipt this Period \$300.00

\$2,500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Primary Page

PAGE 5 OF 5

FOR LINE NUMBER 11(a)(i)

**Contributions from Individuals**

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**NAME OF COMMITTEE (in Full)**  
**Pat Toomey for Congress Committee** **C00326991**

<b>A. Full Name, Mailing Address and ZIP Code</b> Winter, Herman, Mr., Sr. 5822 Shows Road Bethlehem PA 18017 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer _____ Occupation Self Aggregate Year-to-Date > \$250.00	Date (month, day, year) 3/30/2000	Amount of Each Receipt this Period \$250.00
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<b>B. Full Name, Mailing Address and ZIP Code</b> Yurconic, John T, Mr. 5228 Celia Dr Allentown PA 18106 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer John Yurconic Agency Occupation vice President Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/27/2000	Amount of Each Receipt this Period \$1,000.00
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<b>C. Full Name, Mailing Address and ZIP Code</b> Yurconic, John, Mr., Sr. 101 N. Cedar Crest Blvd Allentown PA 18104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Yurconic Agency Occupation Insurance Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/27/2000	Amount of Each Receipt this Period \$1,000.00
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<b>D. Full Name, Mailing Address and ZIP Code</b> Zamborsky, Edward J, Mr. 3438 Sturbridge Place Allentown PA 18104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$250.00	Date (month, day, year) 3/28/2000	Amount of Each Receipt this Period \$250.00
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<b>Full Name, Mailing Address and ZIP Code</b> _____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee _____ Occupation _____ Aggregate Year-to-Date >	Date (month, day, year) _____	Amount of Each Receipt this Period _____
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<b>Full Name, Mailing Address and ZIP Code</b> _____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee _____ Occupation _____ Aggregate Year-to-Date >	Date (month, day, year) _____	Amount of Each Receipt this Period _____
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<b>Full Name, Mailing Address and ZIP Code</b> _____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee _____ Occupation _____ Aggregate Year-to-Date >	Date (month, day, year) _____	Amount of Each Receipt this Period _____
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**SUBTOTAL** of Receipts This Page (optional) \$2,500.00

**TOTAL** This Period (last page this line number only) \$18,450.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 5  
FOR LINE NUMBER 11(c)

**Contributions from Other Political Committees**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)		C00325991	
<b>A. Full Name, Mailing Address and ZIP Code</b> PAC, Bell Atlantic 1717 Arch St Philadelphia PA 19103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$1,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> PAC, Boeing 1200 Wilson Blvd Arlington VA 22209 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$500.00
<b>C. Full Name, Mailing Address and ZIP Code</b> PAC, BUILD 1201 15th St NW Washington DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/30/2000	Amount of Each Receipt this Period \$1,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> PAC, CIGNA 1650 Market St Philadelphia PA 19192 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$500.00
<b>E. Full Name, Mailing Address and ZIP Code</b> PAC, Civic Involve 300 Renaissance Center P.O. Box 300 Detroit MI 48265 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$500.00
<b>F. Full Name, Mailing Address and ZIP Code</b> PAC, GMA 1300 Wilson Blvd Arlington VA 22209 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/28/2000	Amount of Each Receipt this Period \$500.00
<b>G. Full Name, Mailing Address and ZIP Code</b> PAC, CSLF P.O Box 15206 Washington DC 20004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$1,500.00	Date (month, day, year) 3/28/2000	Amount of Each Receipt this Period \$1,000.00

\$5,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

**Contributions from Other Political Committees**

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NAME OF COMMITTEE (in Full)

**Pat Toomey for Congress Committee**

**C00326991**

A. Full Name, Mailing Address and ZIP Code PAC, Deloitte Touche P.O. Box 365 Washington DC 20044 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$2,000.00
B. Full Name, Mailing Address and ZIP Code Pac, Dun+Bradstreet 1200 New Hampshire Ave, NW Suite 440 Washington DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code PAC, Goldman Sachs 1101 Pennsylvania Ave NW Washington DC 20004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code PAC, House 2700 Sanders Road Prospect Heights IL 60070 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code PAC, IBPAC One Thomas Circle NW Suite 400 Washington DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/27/2000	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code PAC, J.P. Morgan Co 60 Wall Street New York NY 10280 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code PAC, LTV Steel 200 Public Square Cleveland OH 44114 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$6,000.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 5

FOR LINE NUMBER 11(c)

**Contributions from Other Political Committees**

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NAME OF COMMITTEE (in Full)

**Pat Toomey for Congress Committee**

**C00326991**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>PAC, MBNA</b> MBNACorporation Wilmington DE 19884		3/31/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date	> \$1,000.00	
<b>PAC, NACS</b> 1605 King St Alexandria VA 22314		3/22/2000	\$1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date	> \$2,500.00	
<b>PAC, NACS</b> 1605 King St Alexandria VA 22314		3/22/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date	> \$2,500.00	
<b>PAC, NBWA</b> 1100 S Washington St Alexandria VA 22314		3/31/2000	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date	> \$5,000.00	
<b>PAC, NHEMA</b> P.O. Box 882 Washington DC 20044		3/31/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date	> \$1,000.00	
<b>PAC, NMLF</b> 720 E Wisconsin Ave Milwaukee WI 53202		3/31/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date	> \$1,000.00	
<b>PAC, Outback Steak</b> 550 N Reo St Suite 204 Tampa FL 33609		3/31/2000	\$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date	> \$5,000.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$15,500.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 4 OF 5  
FOR LINE NUMBER 11(c)

**Contributions from Other Political Committees**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) **Pat Toomey for Congress Committee** **C00326991**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, PACE</b>  <b>P.O Box 391</b>  <b>Ashland KY 41114</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                       Occupation                       Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/31/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, PPandL</b>  <b>Two North Ninth St</b>  <b>Allentown PA 18101</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                       Occupation                       Aggregate Year-to-Date &gt; \$1,500.00</p>	<p>Date (month, day, year)                      3/27/2000</p>	<p>Amount of Each Receipt this Period                      \$1,000.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, PPandL</b>  <b>Two North Ninth St</b>  <b>Allentown PA 18101</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                       Occupation                       Aggregate Year-to-Date &gt; \$1,500.00</p>	<p>Date (month, day, year)                      3/27/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, Praxair</b>  <b>P O Box 2958</b>  <b>Danbury CT 06813</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                       Occupation                       Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/31/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, Skadden Arps</b>  <b>1440 New York Avenue N.W.</b>  <b>Washington DC 20005</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                       Occupation                       Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/31/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, UPS</b>  <b>55 Glenlake Parkway, N.E</b>  <b>Atlanta GA 30328</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                       Occupation                       Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/22/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, Usx Corporation</b>  <b>1101 Pennsylvania Ave, NW Suite 510</b>  <b>Washington DC 20004</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                       Occupation                       Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/27/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>

**SUBTOTAL** of Receipts This Page (optional) \$4,000.00

**TOTAL** This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of item Detailed Summary Page

PAGE 5 OF 5  
FOR LINE NUMBER 11(c)

**Contributions from Other Political Committees**

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**NAME OF COMMITTEE (in Full)**  
**Pat Toomey for Congress Committee** **C00326991**

A. Full Name, Mailing Address and ZIP Code zCommittee to Elect, Charlie Dant 1351 W Highland St Allentown PA 18102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$150.00	Date (month, day, year) 3/24/2000	Amount of Each Receipt this Period \$150.00
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>\$150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>\$30,650.00</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER

18

**Other Receipts**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) **Pat Toomey for Congress Committee** C00326991

A. Full Name, Mailing Address and ZIP Code First Union National Bank 702 Hamilton Mall Allentown PA 18101 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$4,163.74	Date (month, day, year) 3/31/2000	Amount of Each Receipt this Period \$1,493.29 Interest Earned INTEREST/DIVIDEND
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employee  Occupation  Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$1,493.29
TOTAL This Period (last page this line number only)	\$1,493.29

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER

17

**Operating Expenditures**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full) **Pat Toomey for Congress Committee** C00326991

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Postmaster 1000 Postal Road Allentown PA 18103	Postage Postage for office Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/30/2000	\$66.00
Postmaster 1000 Postal Road Allentown PA 18103	Postage Bulk Permit Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/27/2000	\$100.00
Postmaster 1000 Postal Road Allentown PA 18103	Postage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/27/2000	\$4,100.00
Sheraton Jetport 3400 Airport Road Allentown PA 18103	Fundraising Dinner 3/17/00 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/20/2000	\$1,831.41
Welch, St Clair and Assoc. 101 Willowbrook Lane West Chester PA 19382	Campaign Mailings PT-001 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/27/2000	\$8,465.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	\$14,562.41
<b>TOTAL</b> This Period (last page this line number only) .....	\$14,562.41



**LOANS**

Name of Committee (in Full) <b>PAT TOOMEY FOR CONGRESS COMMITTEE</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>PATRICK J. TOOMEY 2336 FOX MEADOW DRIVE ALLENTOWN, PA 18104</b>	Original Amount of Loan <b>75,000.00</b>	Cumulative Payment To Date <b>0.00</b>	Balance Outstanding at Close of This Period <b>75,000.00</b>
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>4/28/98</u> Date Due <u>12/31/00</u> Interest Rate _____ % (app) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
<b>PATRICK J. TOOMEY 2336 FOX MEADOW DRIVE ALLENTOWN, PA 18104</b>	Original Amount of Loan <b>50,000.00</b>	Cumulative Payment To Date <b>25,000.00</b>	Balance Outstanding at Close of This Period <b>25,000.00</b>
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>3/31/98</u> Date Due <u>12/31/00</u> Interest Rate _____ % (app) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer	/	/
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) .....			<b>100,000.00</b>
TOTALS This Period (last page in this line only) .....			<b>100,000.00</b>

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Name of Committee (in Full) Pat Toomey for Congress Committee	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor  Jerry A. Laracuente 701 Harrison Street Allentown, PA 18103	\$0.00	\$1,002.41	\$0.00	\$1,002.41
Nature of Debt (Purpose): Campaign Workers Salary				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	\$1,002.41
2) TOTALS This Period (last page in this line only)	\$1,002.41
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	\$100,000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	\$101,002.41

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

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